U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 70 C	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	Name, file number, and address of labor organization.		
Name Richard C Lannuzzi	Name New York State United Teachers		
·	Labor Organization File Number 070-581		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 800 Troy-Schenectady Road	Street 800 Troy-Schenectady Road		
City Latham	City Latham		
State New York ZIP Code + 4 12110-2455	State New York ZIP Code + 4 12110-2455		
5. Position in labor organization. President & Chair NYSUT Benefit	fit Trust		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	derived income or other economic benefit of ion represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.		
City State ZIP Code + 4			
Signature			
undersigned's knowledge and belief, true, correct, and complete. (See the se	ying documents), has been examined by the signatory and is, to the best of the		
Signed That P. January	On 8-3-05 518-213-6000		
Richard C. Iamuzzi	Date Telephone Number		
Form LM-30 (2003)	Page 1 of 5		

Name of Person Filing Richard Iannuzzi	File	Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name MetLife					
Trade Name, if any:	a. Labor Organization D. Trust				
P.O. Box, Bldg., Room No., if any	c. Employer				
Street One Financial Center, Floor 22	Instance of Transfer of Transf				
City Boston					
State Massachusetts ZIP Code + 4 02111					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name New York State United Teachers Benefit Trust	Contracted provider of programs to union mem	of insurance and financial bership.			
Trade Name, if any:		; 			
P.O. Box, Bldg., Room No., if any		The state of the s			
Street 800 Troy-Schenectady Road	11.b. Approximate dollar value of	such dealing. unknown			
City Latham	12.a. Nature of interest held or				
State New York ZIP Code + 4 12110-2455	June 2004 - Dinner ir meeting = Appr. \$50	conjunction with business			
	Aug. 16, 2004 - Lunch meeting = Appr. \$40	n in connection with business			
		en e			
	12.b. Amount.	approx. \$90			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	The second secon			
Name Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.				

Name of Person Filing Richard Iannuzzi	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name ING Financial Advisers, LLC	a. Labor Organization
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	b. Trust
Street 151 Farmington Avenue	c. Employer
City Hartford	* .
State Connecticut ZIP Code + 4 06156	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name New York State United Teachers Benefit Trust	Contracted provider of financial programs offered to union membership.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 800 Troy-Schenectady Road	
City Latham	
State New York ZIP Code + 4 12110-2455	11.b. Approximate dollar value of such dealing. unknown
	12.a. Nature of interest held or income received.
	Dec. 16, 2004 - Dinner in connection with business meeting = Appr. \$70.00
	Holiday gift basket = Appr. \$40.00
	12.b. Amount. approx. \$110

Name of Person Filing Richard	Iannuzzi	File Number U-
		

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Marsh Affinity Group Services	a. Labor Organization	
Trade Name, if any:	l a last organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1440 Renaissance Drive	c. Employer	
City Park Ridge		
State Illinois ZIP Code + 4 60068-1400		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name New York State United Teachers Benefit Trust	Contracted broker, administrator ar adjudicator of insurance programs of membership.	d claim offered to union
Trade Name, if any:	1745 · · · · · · · · · · · · · · · · · · ·	**** =
P.O. Box, Bldg., Room No., if any	anise () anise (sample des
Street 800 Troy-Schenectady Road		- And Andrews
City Latham		
State New York ZIP Code + 4 12210-2455	11.b. Approximate dollar value of such dealingEst	\$3,900,000
	12.a. Nature of interest held or income received.	
	Sept. 23, 2004 - Dinner in conjunct annual business meeting = Appr. \$50	
	Holiday plant = Appr. \$45	
	12.b. Amount.	approx. \$95



800 Troy-Schenectady Road, Latham, N.Y. 12110-2455 ■Phone: 518-213-6000 ■Internet: www.nysut.org

Richard C. Iannuzzi, President Alan B. Lubin, Executive Vice President Maria Neira, First Vice President Kathleen M. Donahue, Second Vice President Ivan Tiger, Secretary-Treasurer



August 3, 2005

U.S. Department of Labor Employment Standard Administration Office of Labor-Management Standards 200 Constitution Avenue, NW, Room N-5616 Washington, D.C. 20210

RE: LM-30 (Year 2004)

Dear Sirs:

Enclosed please find, for filing with your office, an LM-30 Report for fiscal year 2004.

Mar & C

Richard C. Iannuzzi

Very truly yours,

President

RIC/cda Enclosure